



WIA Program Status Summary  
Title I-D, Section 167 - Migrant/Seasonal  
Farmworker Youth Program

U.S. Department of Labor  
Employment and Training Administration

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a. Grantee Name and Address	b. Grant Number	OMB Approval No: 1205-0429 Expires 07/31/03
	c. Period of Grant From: To:	d. Reporting Period From: To:

I. Participation Summary	Previous Period	Current Period	Grant Cumulative
	(A)	(B)	(C)
A. Total Participants Served			
1. New Participants			
2. Participants Carried Over From Previous Grant			
B. Total Number of Participants Exiting Program			
II. Participant Outcomes			
A. Entered Unsubsidized Employment			
B. Related Assistance Only			
C. Other Outcomes			
III. Total Current Participants (End of Period)			
IV. Participant Enrollments In Program Services			
A. Core Services			
B. Intensive Services			
C. Training Services			
D. Related Assistance Services			

Remarks:

III. CERTIFICATION — I certify that to the best of my knowledge this report is correct and complete.

Name and Title of Authorized Official	Phone Number ( )	Signature	Date Submitted (Month, Day, Year)
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Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. Respondents obligation to reply to these reporting requirements are required to obtain or retain benefits (20 CFR 667.300). The public reporting burden for this collection of information is estimated to average seven (7) hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Office of National Programs, U.S. Department of Labor, 200 Constitution Avenue, N. W., Room N-4641, Washington, D.C. 20210 (Paperwork Reduction Project (1205-0429)).

See Reverse Side for Instructions

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(Nov. 2001)